

Application Data Sheet

APPLICATION INFORMATION

Application Number::

Filing Date:: April 13, 2004

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD Disks:

Number of Copies of CDs::

Sequence Submission?::

Computer Readable Form (CRF)?:: No

Number of Copies of CRF::

Title:: PROCESS AND DISPENSING SYSTEM FOR
PREPARING LIQUID CONCENTRATES FOR
PLASTICS

Attorney Docket Number:: 228559

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 2

Small Entity?:: Yes

Latin Name::

Variety denomination name::

Petition Included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

APPLICANT INFORMATION

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Jeffrey
Middle Name:: M.
Family Name:: Cosman
City of Residence:: St. John
State or Prov. of Residence:: IN
Country of Residence:: US
Street of mailing address:: 10071 Belmont Court

City of mailing address:: St. John
State or Province of mailing address:: IN
Country of mailing address:: US
Postal or Zip Code of mailing address:: 46303-9583

Inventor Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Bruce
Middle Name::
Family Name:: Parker
City of Residence:: Cedar Lake
State or Prov. of Residence:: IN
Country of Residence:: US
Street of mailing address:: 14077 West 130th Court
City of mailing address:: Cedar Lake
State or Province of mailing address:: IN
Country of mailing address:: US
Postal or Zip Code of mailing address:: 46303-8949

Inventor Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Douglas
Middle Name:: A.
Family Name:: Thompson
City of Residence:: Munster
State or Prov. of Residence:: IN
Country of Residence:: US
Street of mailing address:: 8034 Hohman Avenue
City of mailing address:: Munster
State or Province of mailing address:: IN
Country of mailing address:: US
Postal or Zip Code of mailing address:: 46321-1145

Inventor Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Keith
Middle Name::
Family Name:: Grandbois
City of Residence:: Chicago
State or Prov. of Residence:: IL
Country of Residence:: US
Street of mailing address:: 3051 North Racine
City of mailing address:: Chicago
State or Province of mailing address:: IL
Country of mailing address:: US
Postal or Zip Code of mailing address:: 60657

Inventor Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity

Given Name:: Barry
Middle Name:: Scott
Family Name:: Walker
City of Residence:: Whiting
State or Prov. of Residence:: IN
Country of Residence:: US
Street of mailing address:: 2104 Wespark Avenue
City of mailing address:: Whiting
State or Province of mailing address:: IN
Country of mailing address:: US
Postal or Zip Code of mailing address:: 46394-1848

Inventor Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Marshall
Middle Name::
Family Name:: Mullins
City of Residence:: Bourbonnais
State or Prov. of Residence:: IL
Country of Residence:: US
Street of mailing address:: 387 Kathy Drive
City of mailing address:: Bourbonnais
State or Province of mailing address:: IL
Country of mailing address:: US
Postal or Zip Code of mailing address:: 60914-1003

CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 23460
Phone:: (312) 616-5600
Fax:: (312) 616-5700
E-mail Address:: mail@leydig.com

REPRESENTATIVE INFORMATION

Representative Customer Number:: 23460

Representative Designation:: Registration Number:: Representative Name::

DOMESTIC PRIORITY INFORMATION

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application is a	Continuation of	09/884,551	06/18/2001
which claims	benefit of	60/212,180	06/16/2000

FOREIGN APPLICATION INFORMATION

Country:: Application Number:: Filing Date:: Priority Claimed

ASSIGNEE INFORMATION

Assignee name:: Chroma Injecta Color Systems, Inc.
Street of mailing address:: 385 East Joe Orr Road
City of mailing address:: Chicago Heights
State or Province of
mailing address:: Illinois
Country of mailing
address:: US
Postal or Zip Code of
mailing address:: 60411